Duena Vista

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

## FOR INSTRUCTIONS, SEE BACK OF FORM **DISCLOSURE SUMMARY PAGE**

## IA ETHICS AND CAMPAIGN DISCLOSURE BD.

2008 MAY 29 PM 4: 22

	ganization)			
Ledenbarel & Superi	FORM			
IMPORTANT: Indicate by #type of committee you are reporting for	DR-2 DISCLOSURE			
(1) Statewide/Legislative/Judge Standing for Retention Candidate	(Rev. 07/2007) REPORT			
(4) County Central Committee (5) County Candidate (6) City Ca Subdivision Candidate (8) County PAC (9) City PAC (10) Scho	For Office Use Only			
(11) Local Ballot Issue	Comm. #			
CANDIDATE COMMITTEES ONLY:	Political Party (if applicable)	Logged In		
Candidate Name  Mark Rodensus	Scanned			
CET Down	Kep-	Computer		
Office Sought Sepension	District (if Sepate or House)	Audited		
- County States				
Late reports are subject to possible civil and criminal penalties, candidate's committee, and the chairperson, for any other type	Pursuant to Iowa Code sections 68B.32A(7)	and 68A.401(3), the candidate, for a		
Illiam is A A				
MARKA RECORDER		5-29-08		
SIGNATURE OF PERSON FILING DEPORT	TELEPHONE	DATE SIGNED		
I AM FILING A MAY 19	REPORT FOR (1) ELECTION /(2)	NON-ELECTION YEAR.		
(report date) Indicate by # 1				
☐CHECK IF AMENDMENT TO REPORT DATED	Loca	Committees, enter Date of Election		
—		June 3 2008		
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file	nty & Local Committees, enter County in			
(100 mast commute to life reports until a DN-3 is ill	whic	SUENA VISTA		
		[JUCIUM V-3 / M		
STATEMENT OF CASH ON HAI	ND			
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the set to be set to	e cash on hand at the end	•		
of the last reporting period or must be zero if this is	TIEST REPORT THEM.)			
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
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COMMITTEE NAME (Must be some as on Statement of Organization)    Committee NAME (Must be some as on Statement of Organization)			(Rev. 06/97) CONTRIBUTIONS  CHECK THIS BOX IF AMENDING FORM			
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION	
MAY 1	MARK Relent		signs	110000		
MAY	MARY Redenbaugh		Newspapen	800		
\						
SUB-TOTAL  TOTAL (if last page of this schedule)					. 1	
*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.						

SCHEDULE

FOR INSTRUCTIONS, SEE BACK OF FORM